

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

COOPERATIVE ARRANGEMENT WITH NEW JERSEY WIC PROGRAM

4. The State agency has made cooperative arrangements with the Supplemental Food Programs for Women, Infants and Children (WIC) in order to coordinate services to all Medicaid recipients who are either pregnant women, postpartum women during the six months after termination of pregnancy, women up to one year postpartum who are breastfeeding their infants or who have children below the age of five. Both the Medicaid Program of New Jersey and the New Jersey WIC Supplemental Food Program agree to inform their respective recipients and clients about the availability of benefits for those individuals and families who may be eligible for the other program. The WIC agencies will provide information and referrals to WIC applicants who appear Medicaid eligible but are not participating. The Division will encourage county boards of social services/welfare agencies to refer potential WIC recipients to WIC local agencies. Both WIC of New Jersey and New Jersey Medicaid will coordinate services and outreach activities where possible.

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- i) The yearly Capital Facilities Allowance is computed using information provided by the uniform costs reports. For hospitals on a calendar year basis, this amount will be the 1992 depreciation and reasonable interest expense, excluding any portion associated with major moveable equipment and any interest income reported as an expense recovery. For those hospitals on fiscal year basis, actual year's depreciation and reasonable interest applicable to rate year 1992 shall be used excluding any portion associated with major moveable equipment and any interest income reported as an expense recovery.
- 1) Requests for exceptions to this methodology may be accepted and evaluated only when a major capital project has resulted in a significant change in depreciation and reasonable interest from the most current actual reporting year to the rate year.
- ii) All building and fixed depreciation and interest capital costs as defined in 6:18 related to GME programs shall be determined based on the 1992 audited Medicare Cost Report (HCFA 2552) and shall be excluded from the base year cost used to calculate the Medicaid DRG inpatient rates.

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SUPERSEDES 93-11-MA(NJ)

2. Major Moveable Equipment: For the purpose of calculating the Price Level Depreciation Allowance, Major Moveable Equipment is grouped into four categories based on the cost center function where the equipment is utilized: Beds and nursing equipment; Diagnostic and therapeutic equipment; General service equipment; and Business service equipment.
- i. The following rules shall apply in calculating the Price Level Allowance for a given year:



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- (1) Only equipment which was not been fully depreciated at the start of the fiscal year is to be used in the calculation of the Price Level Allowance.
- (2) The depreciation recorded and reported on all equipment subject to the Price Level Allowance must be calculated by the straight-line method, using at the time of the cost filing the most recent approved American Hospital Association (AHA) Recommended Useful Life (i.e., 1978 revision) or Asset Depreciation Range (ADR).
- (3) Only capitalized equipment and related capitalized costs can be used in the calculation of the Price Level Allowance.
- (4) The price level factors for each of the four categories will be developed by the Division. For years prior to current cost base year, the factors to be used for price leveling depreciation are as follows:

<u>Category</u>	<u>Proxy</u>
Beds and Nursing Equipment	Marshall and Swift Hospital Equipment Cost Index
Diagnostic and Therapeutic Equipment	Marshall and Swift Hospital Equipment Cost Index
General Service Equipment	Producer Price Index (PPI) 1161,

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